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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
The foundation may be able to use a copy of this return to satisfy state reporting

OMB No 1545-0052 2009

	- III			ivote. The roundati		0 00.0 10 000 1	ш оору о.				ating requirements	
_				or tax year begi					and end			, 20
G	Check all that apply Initial return Amended return				Initia	٦	of a former p	ublic cha		L	Final return	
_					return		Addres	ss change			lame change	
			Name of for	undation							A Employer identif	cation number
ι	Jse th	ie IRS	KRAFT F	OUNDATION								
	lab	el.	C/O HIC	KORY POINT	BANK	& TRUST,	CO-TR	USTEE			37-	-1307161
(Other	wise,	Number and	street (or P O box	number if	mail is not deliver	red to street	address)	Room/su	ute	B Telephone number (se	e page 10 of the instructions)
print							•					
	or ty	pe.	225 NOR	TH WATER ST	יפקבים				102		12.	17) 875-3131
		pecific							102		C If exemption applic	
Instructions. City or town, state, and ZIP code								pending, check hen				
DECATUR, IL 62523									D 1. Foreign organiza	tions, check here . P		
											2 Foreign organiza 85% test, check	
H	<u>C</u> he	ck type	e of organiza	ation X Secti	on 501(d	<u>)(3)</u> exempt	private f	oundation			computation .	
\perp	s	ection 4	4947(a)(1) no	nexempt charitable	e trust	Other ta	axable pr	ivate founda	tion		E If private foundate	n status was terminated
1	Fair	marke	et value of all	l assets at end	J Accou	unting metho	id. X C	ash Acc	rual			o)(1)(A), check here .
	of ye	ear <i>(fro</i>	m Part II, co	ol (c), line	□ Ot	her (specify)	_				1	in a 60-month termination
		▶ \$	1,7					cash basis)			-	o)(1)(B), check here
			rsis of Reve	enue and Expens		. , ,		, 				(d) Disbursements
_		total c	f amounts in d	columns (b), (c), an	d (d)	(a) Revenu expenses		(b) Net inve		((c) Adjusted net	for charitable
				y equal the amount ge 11 of the instruct		books		incom	ne		income	purposes
\neg							2,096.			 		(cash basis only)
	1		l liftha	, etc., received (attach sol foundation is not req	nedule) . L		2,090.	-		<u> </u>		
	2	Check	attach	Sch B		· · ·	0 400	ļ	0.400	ļ		
	3	Interest	on savings and	d temporary cash inves	stments	3	9,499.	3	9,499.			
	4	Divide	nds and intere	est from securities						ļ		
	5 a	Gross	rents									
	ь	Net ren	tal income or (lo	oss)								
0	6a	Net gar	n or (loss) from	sale of assets not on	line 10	13	1,746.					
2	b	Gross s	sales price for all	165								
Revenue	7		on line 6a Lagin net inci	ome (from Part IV,	line 2)			13	1,746.			
æ		-	_									
	8		•	tal gain								
	9 10 a	Gross s	e modification ales less retums	ns · · · · · · · · ·	}							
			wances							 		
			ost of goods sole							-		
	C) (attach schedule)						-		
	11	Other	income (attac	ch schedule)								
_	12	Total.	Add lines 1 th	nrough 11			3,341.		1,245.			
	13	Compe	nsation of office	ers, directors, trustees	, etc		2,500.	•	2,500.			
	14			aries and wages .	1							
šes	15			loyee benefits								
eñ	l			chedule)								
and Administrative Expenses				tach schedule)				1		1	•	
E E	ı											
Ž.	l			fees (attach schedu				 	<u> </u>	-	<u>.</u>	
tra	17				لديد		15.		15.	├		-
ij.	18	•		e) (see page 14 of the ins	´ [10.	├		
Ē	19	•	•	h schedule) and de				 		 		
ğ	20	Occup	ancy						-	<u> </u>		
ğ	21	Travel	, conferences	, and meetings						ļ		
ā	22	Printin	g and publica	ations	[<u> </u>
ng	23	Other	expenses (att	ach schedule) AT	СН 3		1,150.					1,150
ä	24			d administrative ex								
Operating				がは、「下口			3,665	1	2,515.	.		1,150
ŏ	25	700 1	Printed	grants paid	Σ[4,000			†		104,000
	25						7,665	 	2,515.	\vdash		105,150
_	26			rsements. Add lines			.,, 505	1	2,313.	+		103,130
	27				01		·	1				
				xpenses and disbursely	,	6	5,676	!		<u> </u>		
	b	Net in	vestm ent (ind	one Minesaure, ei	nte r -0-)			16	8,730.	<u> </u>		
	۰ ا	Adius	had not incom	of nevative ente	- 0 \			1		1	-0-	1

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ATCH 2

Б	art II	Ralanco Shoots At	tached schedules and amounts in the escription column should be for end-of-year	Beginning of year	End o	f year
	art II	Dalance Sheets de	nounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
l	1	Cash - non-interest-bearing				
-	2	Savings and temporary cas	sh investments	233,461.	397,197.	397,197.
-						
1		Less: allowance for doubtfu	ul accounts ▶			
	4	Pledges receivable ▶				
		Less allowance for doubtfe	ul accounts ▶			
	5	Grants receivable				
	6	Receivables due from offic	ers, directors, trustees, and other			
		disqualified persons (attach	schedule) (see page 16 of the instructions)			
	7	Other notes and loans rec	eivable (attach schedule)			
		Less allowance for doubtfo	ul accounts 🕨			
8	8	Inventories for sale or use				
Assets			erred charges			
As	10 a	Investments - U.S. and state g	overnment obligations (attach schedule) * *	300,086.		
	b	Investments - corporate st	ock (attach schedule) ATCH 5	888,841.	1,132,749.	1,371,631.
ļ			onds (attach schedule)			
	11	Investments - land, buildings, and equipment basis	>			
		Less accumulated depreciation (attach schedule)				
	12		ans			
	13	Investments - other (attach	schedule)			
	14	Land, buildings, and equipment basis	•		_	!
		Less accumulated depreciation (attach schedule)	n >			
ł	15	Other assets (describe	ATCH 6	42,026.		
	16	Total assets (to be comple				
		instructions Also, see pag-	e 1, item I)	1,464,414.	1,529,946.	1,768,828.
	17	Accounts payable and acc	rued expenses			
	18					
စ္ဆ	19					
≝	20		trustees, and other disqualified persons			
Liabilities	21	Mortgages and other note	s payable (attach schedule)			,
Ë	22		>)[1
		·				
	23	Total liabilities (add lines	17 through 22)			
		Foundations that follow	w SFAS 117, check here ▶ 📖 │			
		and complete lines 24	through 26 and lines 30 and 31.			
Ses	24	Unrestricted				
ᆲ	25	Temporarily restricted				
Ba	26	Permanently restricted			<u></u>	
덛		Foundations that do no	ot follow SFAS 117,	•		
교		check here and compl	ete lines 27 through 31. $\blacktriangleright X$			
5	24 25 26 27 28 29 30	Capital stock, trust princip				
ets	28	Paid-in or capital surplus, or la	nd, bldg , and equipment fund			
SS	29		ted income, endowment, or other funds	1,464,414.	1,529,946.	
ă	30	Total net assets or fund b	alances (see page 17 of the			
ž				1,464,414.	1,529,946.	
	31		ssets/fund balances (see page 17	[
		of the instructions)		1,464,414.	1,529,946.	
			ges in Net Assets or Fund			
1	Tota	I net assets or fund bala	inces at beginning of year - Part II	, column (a), line 30 (must	agree with	_
	end-	of-year figure reported o	on prior year's return)		<u>1</u>	1,464,414.
2	Ente	r amount from Part I, line	e 27a		2	65,676.
3	Othe	r increases not included	e 27a I in line 2 (itemize) ▶ATTACH	MENT 7	3	-144.
4	Add	lines 1, 2, and 3				1,529,946.
5	Decr	eases not included in lin	ne 2 (itemize) ▶		5_	
6	Tota	l net assets or fund bala	inces at end of year (line 4 minus	line 5) - Part II, column (b),	line 30 6	1,529,946.

**ATCH 4

Part IV Capital Gain	s and Losses for Tax on Inve	estment Income		<u> </u>	
	nd describe the kind(s) of property sold (e		(b) How acquired	(c) Date acquired	(d) Date sold
2-story t	P-Purchase D-Donation	(mo, day, yr)	(mo , day, yr.)		
1a SEE PART IV SCH	EDULE			ļ	
<u>b</u>		 			
С				ļ	
<u>d</u>				<u> </u>	
<u>e</u>				ļ	
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale				(h) Gain or (lo (e) plus (f) mini	
_a					
_b					
<u>c</u>					
<u>d</u>					
_e			1		
Complete only for assets s	showing gain in column (h) and own	ned by the foundation on 12/31/69		Gains (Col (h) g	
(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any	col	(k), but not less	
a					
b					
С					
d					
е					
2. Contal gain not magne o	r (not conital lace)	gain, also enter in Part I, line 7			
2 Capital gain net income o	f (flet capital loss) {	(loss), enter -0- in Part I, line 7	2		131,746.
	n or (loss) as defined in sections 12		1 1		
If gain, also enter in Part	i, line 8, column (c) (see pages 13	and 17 of the instructions)			
If (loss), enter -0- in Part I,	line 8	<u> </u>	3		· · · · · · · · · · · · · · · · · · ·
Part V Qualification U	nder Section 4940(e) for Redu	uced Tax on Net Investment Inc	come		
	r the section 4942 tax on the distrib not qualify under section 4940(e).	• •	ase peno	d? [Yes X No
	nount in each column for each year		efore mal	ung any entres	
(a)	T			(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution r (col (b) divided by	
2008	118,015.	1,911,289.	<u> </u>	(55) (2) (1)1652 2	0.061746
2007	158,025.	1,964,988.	 		0.080420
2006	74,015.	1,916,701.	†		0.038616
2005	63,515.	1,249,818.	1		0.050819
2004	25,000.	633,778.			0.039446
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		-	
2 Total of line 1 column (d	0		2		0.271047
3 Average distribution ratio	o for the 5-year base period - divide	the total on line 2 by 5 or by the	 		
-	ndation has been in existence if less		3		0.054209
4 Enter the net value of no	ncharitable-use assets for 2009 fro	m Part X, line 5	4	1,	649,881.
4 Enter the fiet failed of the	Monariable dee deeds for 2000 no			-	
5 Multiply line 4 by line 3			5		89,438.
3 Waltiply line 4 by line 3		• • • • • • • • • • • • • • • • • • • •	- -	 	
6 Enter 1% of not investme	ent income (1% of Part I, line 27b)		6		1,687.
o Enter 176 OF HEL INVESTME	entincome (170 or Fait I, IIIIe 270)		-		
7 Add lines E and C			,		91,125.
7 Add lines 5 and 6			7		
Cotor avalitures distinct.it	ions from Bart VII line 4				105,150.
If line 8 is equal to or g Part VI instructions on pa	ons from Part XII, line 4 reater than line 7, check the box in ge 18	n Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

conflict with the state law remain in the governing instrument?

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the

Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV

8 b ts the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page

Form 990-PF (2009)

Х

Х

Х

instructions) ▶ IL,

names and addresses

Х

Х

	990-PF (2009) 37-1307161		F	age 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	N/A			
14	Website address ► HICKORY POINT BANK & TRUST Telephone no. ► 217-875	-313	1	
	Located at ▶225 N. WATER ST. DECATUR, IL ZIP+4 ▶ 62523			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. ▶	\Box
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			_
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
•	were not corrected before the first day of the tax year beginning in 2009?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			
_	6e, Part XIII) for tax year(s) beginning before 2009? Yes X No			
	If "Yes," list the years	i		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b		Х
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			*
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2009)	3 b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
D	but the foundation make any investment in a prior year (out after December 31, 1909) that could peoplarize its	45		x

orm 990-PF (2009)		37-130			Page 6
Part VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
 5a During the year did the foundation pay or incur any amout (1) Carry on propaganda, or otherwise attempt to influent (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or otherwise. 	nce legislation (section n (see section 4955); o	or to carry on,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,	
 (4) Provide a grant to an individual for travel, study, or of (4) Provide a grant to an organization other than a char section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charital purposes, or for the prevention of cruelty to children or 	itable, etc , organization (see page 22 of the installation) ble, scientific, literary,	on described in structions)	Yes X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the trans Regulations section 53 4945 or in a current notice regard Organizations relying on a current notice regarding disas	actions fail to qualify ding disaster assistance ter assistance check h	y under the exceptions be (see page 22 of the here	described in instructions)?		
 c If the answer is "Yes" to question 5a(4), does the found because it maintained expenditure responsibility for the g If "Yes," attach the statement required by Regulations sec 6a Did the foundation, during the year, receive any funds, or 	rant? tion 53 4945-5(d)	• • • • • • • • • • • • • • • • • • • •	. Yes No		
 on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly "Yes" to 6b, file Form 8870. 	ctly or indirectly, on a	personal benefit contrac		6b	х
7a At any time during the tax year, was the foundation a pa	•	•	. — —		X
b If yes, did the foundation receive any proceeds or have Part VIII Information About Officers, Directors					^_
and Contractors List all officers, directors, trustees, foundation m		•		•	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
ATTACHMENT 8		2,500.	-0-	-0	_
2 Compensation of five highest-paid employees (of	ther than those inc	luded on line 1 - se	e page 23 of the inst	ructions).	
If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	account, vances
NONE					
					·
otal number of other employees paid over \$50,000 .	<u> </u>	<u> </u>	<u> </u>	▶	

Part VIII	Information About Officers, Directors, Trustees, Foundation Manand Contractors (continued)	agers, Highly Paid Employ	ees,
3 Five high	est-paid independent contractors for professional services (see page 23	of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
· · · <u>-</u> · -			
			·
		İ	
			NONE
Total numbe	r of others receiving over \$50,000 for professional services	<u> </u>	▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	lation's four largest direct chantable activities during the tax year. Include relevant statistical informances and other beneficiaries served, conferences convened, research papers produced, etc	mation such as the number	Expenses
1 N/A			
•			
		-	
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see page 23 of the inst	tructions)	
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 an	d 2	Amount
1 NONE			
2			-
All other pro-	gram-related investments. See page 24 of the instructions		···
3 NONE			
Total. Add I	ines 1 through 3	<u> </u>	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreignee page 24 of the instructions.)	gn foundatio	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,413,228.
b	Average of monthly cash balances	1b	149,619.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	112,159.
d		1d	1,675,006.
е	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,675,006.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
		4	25,125.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,649,881.
6	Minimum investment return. Enter 5% of line 5	6	82,494.
_	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here ▶ ☐ and do not complete this private in the complete the complete this private in the complete this priva		
1	Minimum investment return from Part X, line 6	1	82,494.
2a	Tax on investment income for 2009 from Part VI, line 5 2a 1,687.		
Ь	Income tax for 2009 (This does not include the tax from Part VI.)		
С		2c	1,687.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,687. 80,807.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	80,807.
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	80,807.
_		1 - 1	<u> </u>
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	105,150.
Ь	Program-related investments - total from Part IX-B	1b	0.
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	41/48444	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
a		3a	0.
b		3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	105,150.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
~	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	1,687.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	103,463.
u	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v		
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
•	line 7				80,807.
2	Undistributed income, if any, as of the end of 2009			· · · · · · · · · · · · · · · · · · ·	
a	Enter amount for 2008 only				
	07 06 05 1				
3	Excess distributions carryover, if any, to 2009.	·-			
_	From 2004				
	From 2005				
	F 0000				
d	From 2007 48, 603.				
e	From 2008 24,066.				
	Total of lines 3a through e	72,669.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4. ▶ \$105,150.		Í		
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				80,807.
	Applied to 2009 distributable amount	24,343.			00,007.
е 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2009	21/0101			
•	(If an amount appears in column (d), the same				
_	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	97,012.			
b					
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been				,
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable				
_	amount - see page 27 of the instructions	·		 	
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions	<u> </u>			
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be	:			
7	distributed in 2010			· - · · · · · · · · · · · · · · · · · ·	
-	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				
	applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2010.			· · · · · · · · · · · · · · · · · · ·	
•	Subtract lines 7 and 8 from line 6a	97,012.			
10	Analysis of line 9				
a					
b	Excess from 2006				
c	Excess from 2007 48,603.				
d	Excess from 2008 24,066.				
_е	Excess from 2009 24,343.				

	990-PF (2009)							Page_10_
Pa	rt XIV Private Oper	ating Foundations (see page 27 of the	e instructions and Pa	art VII-A, qu	estion 9) 1	A TO	PPLICABL
1 a	If the foundation has				rating			
	foundation, and the ruling	g is effective for 2009, ei	nter the date of the ruling),	▶∟			
Ь	Check box to indicate wh	ether the foundation is a	private operating foun	dation described in sectio	n	4942(J)(3)	or	4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) Total
	justed net income from Part I or the minimum investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2	006		
b	year listed							
c	Qualifying distributions from Part							
đ	XII, line 4 for each year listed. Amounts included in line 2c not used directly for active conduct of exempt activities							
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line							
3	2d from line 2c Complete 3a, b, or c for the							
а	alternative test relied upon "Assets" alternative test - enter		ł					
	(1) Value of all assets (2) Value of assets qualifying under section							
b	4942(j)(3)(B)(i) "Endowment" alternative test- enter 2/3 of minimum invest-							
	ment return shown in Part X, line 6 for each year listed				<u> </u>			
С	"Support" alternative test - enter				1			
	(1) Total support other than gross investment income (interest, dwdends, rents, payments on securities loans (section 512(a)(5)).							
	or royalties)			-	-			
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942							
	(j)(3)(B)(iii) (3) Largest amount of support from an exempt							
	organization			- 	 			
Pa	-3.7	ary Information (C	omplete this part	only if the found	dation had	\$5,000 or	more	e in assets
		during the year - se			aution iluu	4 0,000 0.		400040
1	Information Regardin	g Foundation Manage	rs:	·				
а	List any managers of before the close of any N/A	the foundation who h	nave contributed mo				by the	foundation
_			100/					
b	List any managers of ownership of a partner					an equally la	irge po	ortion of the
	N/A							
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:				
	Check here ► X if the unsolicited requests to organizations under of	for funds If the foun	dation makes gifts,	grants, etc (see pag	ritable organ je 28 of the	nizations and instructions	does) to in	not accept dividuals or
а	The name, address, a	ind telephone number	of the person to who	m applications should	be addressed	j.	•	
b	The form in which app	lications should be su	bmitted and informat	ion and materials the	y should inclu	ide.	-	
c	Any submission dead	ines						
d	Any restrictions or lifactors	imitations on awards	, such as by geog	raphical areas, charit	table fields,	kınds of ıns	titution	s, or other

3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual,	Foundation		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	roospion		
a , ara daring the year				
ATTACHMENT 9				
]		
			;	
		,		
			!	
			<u></u>	104 000
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	104,000.
b Approved for future payment				
	[
Total	1	L	L	
Total		<u></u>	3b	l

Form 990-PF				37-	-1307161	Page 12
Part XVI	-A Analysis of Income-Produ	cing Activ	vities			
Enter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
4.5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See page 28 of the instructions)
1 Program	n service revenue					the instructions)
в						
d						
e						_
f					_	·
_	s and contracts from government agencies			-		
	rship dues and assessments			 		
	ds and interest from securities			14	39,499.	
	tal income or (loss) from real estate					
	ot-financed property					
b Not	debt-financed property	ļ				
	al income or (loss) from personal property					
	nvestment income	I .		18	131,746.	
	(loss) from sales of assets other than inventory			+	131,710.	<u> </u>
	ome or (loss) from special events orofit or (loss) from sales of inventory	1				<u></u>
•	evenue a				_	
b					-	
c						
d						
e				+	171,245.	
	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		·	_!		474 045
Part XVI Line No. ▼	Explain below how each active the accomplishment of the for page 29 of the instructions)	ity for wh	ich income is reporte	d in columi	n (e) of Part XVI-A cor	such purposes) (See
		-				
			NOT APPLICABI	LE		
						
	<u> </u>					
			·			
	 					

orm	990-PF (2009)	

	330-FT					37 130710				ge io
Pai	rt_XVII	Information I Exempt Orga		nsfers To and T	ransaction	ns and Relation	onships Wit	h Nonc	hari	table
1	in sec	ne organization directly	y or indirectly eng ode (other than se	ection 501(c)(3) organ	nizations) or				Yes	No
а	organı Transi	zations? fers from the reporting f	oundation to a nonch	naritable exempt organiz	ation of				İ	İ
		ash						1a(1)		Х
	(2) O	ther assets						1a(2)		Х
b		transactions:						[
		ales of assets to a nonch								X
		urchases of assets from								X
		ental of facilities, equipm							1	X
		eimbursement arrangeme							1	X
		oans or loan guarantees erformance of services o								X
c		ng of facilities, equipmer							"—	Х
		answer to any of							fair	markel
		of the goods, other			-					
		in any transaction of			·=					
					·					
(a) l	ine no	(b) Amount involved	(c) Name of nonc	haritable exempt organiza		Description of transfe	ers, transactions, and	shanng am	angeme	nts
		N/A			N/	A	·· ·			
						<u></u>				
				·						
	sectio	foundation directly or n 501(c) of the Code (otl s," complete the followin	her than section 501			tax-exempt organiz	ations described		'es [× No
		(a) Name of organizatio	n	(b) Type of organ	ızatıon	(0	c) Description of rela	itionship		
										
										
							· · · · · · · · · · · · · · · · · · ·			
										
	Under belief	penalties of perjury, I decl it is true, correct, and com	are that I have examir	red this return, including reparer (other than taxpa)	accompanying yer or fiduciary)	schedules and statem is based on all inform	nation of which pre	parer has a	knowled any kno	ige and wiedge
١		MIKEKALE	ty AYY/T	0	5//	<u>4/10</u>	COLP	step		
ere	(*) Si	gnature of officer or trustee	U		Date	e /	Title	orio identi	6.00	
Sign Here	Paid C Preparer's Use Only	Preparer's signature	Geneur	ha O	5/5/10	Check if self-employe	numbe	er's identi r (See Sign of the inst	ature o	
	Paid Preparer's Use Only	Firm's name (or yours if	BKD, LLE	?			EIN ▶ 44-01	60260		
	₹ ⊃	self-employed), address		TH WATER ST.,	SUITE 40	00	· · · ·		_	
		and ZIP code	DECATUR	IL		62523	Phone no 217	-429-2	2411	

Phone no 217-429-2411

DECATUR,

IL

62523

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

Employer identification number

KRAFT FOUNDATION	ANY 6 MDUOM CO MDUOMBE	27 1207161
Organization type (check one	BANK & TRUST, CO-TRUSTEE	37-1307161
Organization type (Check one	-)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)(³) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a priva	ate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private f	oundation
	501(c)(3) taxable private foundation	
•	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule	and a Special Rule See
General Rule		
-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$ one contributor Complete Parts I and II	5,000 or more (in money or
Special Rules		
sections 509(a)(1)	c)(3) organization filing Form 990 or 990-EZ that met the 331/3% suppand 170(b)(1)(A)(vi), and received from any one contributor, during the contributor on (i) Form 990, Part VIII, line 1h or (ii) Form 990-	ne year, a contribution of the greater
the year, aggregate	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received e contributions of more than \$1,000 for use <i>exclusively</i> for religious, chass, or the prevention of cruelty to children or animals. Complete Parts	naritable, scientific, literary, or
the year, contribution aggregate to more year for an exclusive applies to this organization.	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received ons for use <i>exclusively</i> for religious, charitable, etc., purposes, but the than \$1,000. If this box is checked, enter here the total contributions rely religious, charitable, etc., purpose. Do not complete any of the paranization because it received nonexclusively religious, charitable, etc.,	se contributions did not that were received during the ts unless the General Rule contributions of \$5,000 or more
990-EZ, or 990-PF), but it mu or on line 2 of its Form 990-F 990-PF)	t is not covered by the General Rule and/or the Special Rules does not ust answer "No" on Part IV, line 2 of its Form 990, or check the box or PF, to certify that it does not meet the filing requirements of Schedule duction Act Notice, see the Instructions	line H of its Form 990-EZ,
for Form 990, 990-EZ, or 990-PF.	Auction Act Mouce, see the mistrictions SC	eaule & (Form 330, 330-€2, 0f 330-₽7) (2003)

Name of organization

KRAFT FOUNDATION

C/O HICKORY POINT BANK & TRUST, CO-TRUSTEE

Employer identification number 37-1307161

Part Contributo	's (see instructions)
-------------------	------------------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BURNELL KRAFT 12 ALLEN BEND PLACE DECATUR, IL 62526	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Page d

f Part II

Name of organization KRAFT FOUNDATION

C/O HICKORY POINT BANK & TRUST, CO-TRUSTEE

Employer identification number 37-1307161

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	687 SHARES ADM STOCK		08/04/2009
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

JSA 9E1254 1 000

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). OMB No 1545-0092

Employer identification number Name of estate or trust KRAFT FOUNDATION C/O HICKORY POINT BANK & TRUST, CO-TRUSTEE 37-1307161 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the the entire year (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo . day, yr) Subtract (e) from (d) instructions) 1a **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b 2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (b) Date acquired (c) Date sold (a) Description of property (see page 4 of the the entire year (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) Subtract (e) from (d) instructions) 6a 131,746. 6b **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Capital gain distributions 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 131,746 column (3) on the back .

Schedule D (Form 1041) 2009

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedi	ule D (Form 1041) 2009			_			Page 2
Part	III Summary of Parts I and II		(1) Bene	eficiaries'	(2) Esta	ite's	(2) Total
	Caution: Read the instructions before completing this p	art	(see p	page 5)	or trus	t's	(3) Total
	Net short-term gain or (loss)	13					
	Net long-term gain or (loss):						121 746
a	Total for year	14a					131,746.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b					
. с	28% rate gain	14c					121 746
	Total net gain or (loss). Combine lines 13 and 14a	15		4-1-161	44445		131,746.
Note o Pai	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form It V, and do not complete Part IV If line 15, column (3), is a net loss, complete Pa	1 990-1 art IV a	, Part I, line nd the Car	e 4a) it lines cital Loss C	: 14a and 15, (arryover Wo i	coiumi r kshee	i (2), are net gains, go s necessarv
Pari							
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Pa	art I lu	ne 4c if a tr	ust) the si	maller of		
	· · · · · · · · · · · · · · · · · · ·				4	16	(
Note	: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page	ė i, im	e 22 (or Fo	orm 990-T, I	ine 34), is a l	oss, co	mplete the Capital Loss
Carry	ove Worksheeton page 7 of the instructions to figure your capital loss carryove	r					
	V Tax Computation Using Maximum Capital Gains Rate						
	1041 filers. Complete this part only if both lines 14a and 15 in colu			s, or an ar	nount is ent	ered i	in Part I or Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more ion: Skip this part and complete the worksheet on page 8 of the instruction.		zero				
	her line 14b, col. (2) or line 14c, col. (2) is more than zero, or	UIIS II					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero						
	990-T trusts. Complete this part only if both lines 14a and 15 are	e gair	s, or qual	lified divide	ends are in	cluded	d in income in Part I
of Fo	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa						
eithe	r line 14b, col (2) or line 14c, col (2) is more than zero						
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		. 17				
18	Enter the smaller of line 14a or 15 in column (2)	-					
	but not less than zero						
19	Enter the estate's or trust's qualified dividends						
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19						
20	Add lines 18 and 19						
21	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0 ▶ 21					i	
22	Subtract line 21 from line 20 If zero or less, enter -0-		22				
23	Subtract line 22 from line 17 If zero or less, enter -0-		23			i	
24	Enter the smaller of the amount on line 17 or \$2,300		24			:	
25	Is the amount on line 23 equal to or more than the amount on line 24?						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box		25			ì	
20	No. Enter the amount from line 23 Subtract line 25 from line 24	• • •	26				
26 27	Subtract line 25 from line 24		20			1	
21	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	o 22	27				
	165. Skip lines 27 tard 50, go to line 51						
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
	Zittor tillo dinodrit mont me de (i mio de riching dinor d')					!	
29	Subtract line 28 from line 27		29				
30	Multiply line 29 by 15% (15)					30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rat				nd Trusts		
	(see the Schedule Ginstructions in the instructions for Form 1041)					31	<u>-</u>
32	Add lines 30 and 31					32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Raf	te Sch	nedule for	Estates a	nd Trusts		
	(see the Schedule Ginstructions in the instructions for Form 1041).					33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33	here	and on Fo	orm 1041,	Schedule		
	G, line 1a (or Form 990-T, line 36)	<u></u>	<u></u>		<u> </u>	34	
						•	1 1. D (F 4044) 2000

Page 2

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side **Employer identification number** KRAFT FOUNDATION 37-1307161 Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (f) Gain or (loss) Subtract (e) from (d) acquired (mo , day, yr) (mo , day, yr) instructions) 6a 08/07/2009 ADM STOCK 19,958 2,096. 17,862. 32,011. ENTERPRISE PRODS 12/15/2009 145,895. 113,884. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b 131,746. Schedule D-1 (Form 1041) 2009

JSA

FORM 990-PF - PART IV

Kind of P	roperty	INS AND LO	Desc	ription		P	Date	Date sold
Constant	Destry	ļ	Desc		1 E E E E	ρĹ.	acquired	
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
expenses or date 1	<u> </u>	, Dugia .	1 121311703	I IZIJIJUS	1 401 54515	\sqcap	(1005)	
		ADM STOCK				Ш	VAR	08/07/200
19,958.		2,096.				$\ \cdot\ $	17,862.	
		ENTERPRISE	DDODS				VAR	12/15/200
145,895.		32,011.	FRODS				113,884.	12/13/200
113,053.		32,311.					113,001.	
OTAL CATALIT	2667						121 746	
OTAL GAIN(LO	oss)					$\ \cdot\ $	<u>131,746.</u>	
						$ \cdot $		
							i	
						11		
						\prod		
						Ш		
						H		
						Н		
								1
						$\ \ $		
		İ				11		

- TAXES FORM 990PF, PART I

KRAFT FOUNDATION

REVENUE AND

EXPENSES PER BOOKS

NET INVESTMENT INCOME

ILLINOIS FILING FEE

DESCRIPTION

15.

TOTALS

15.

15.

15.

11:26:40 AMV 09-6

ATTACHMENT 2

ATTACHMENT

ATTACHMENT

1,150.

1,150.

TOTALS

REVENUE AND

- OTHER EXPENSES

PART I

FORM 990PF,

EXPENSES PER BOOKS

DESCRIPTION ACCOUNTING BANK FEES

1,150.

CHARITABLE PURPOSES

PAGE 23

ATTACHMENT 3

SC8241 D200 5/4/2010

89254

TX1000

11:26:40 AMV 09-6

KRAFT FOUNDATION

AND STATE OBLIGATIONS - U.S. PART FORM 990PF,

DESCRIPTION

U.S. TREASURY BONDS

US OBLIGATIONS TOTAL

ATTACHMENT

ATTACHMENT 4

11:26:40 AMV 09-6 SC8241 D200 5/4/2010

89254

TX1000

PAGE 24

ATTACHMENT 5	ENDING ENDING BOOK VALUE FMV	705,839. 960,497. 99,886. 65,200. 31,173. 32,205. 17,533. 15,130. 3,169. 3,169. 47,218. 57,970. 45,659. 63,620. 45,540. 68,190.
FORM 990PF, PART II - CORPORATE STOCK	DESCRIPTION	ADM STOCK INLAND REAL ESTATE CORP JOHNSON & JOHNSON GENERAL ELECTRIC GENWORTH FINANCIAL INVESTMENT PLANNERS BP CONSOLIDATED EDISON EATON EXELON EXELON

TOTALS

ATTACHMENT 5

KRAFT FOUNDATION

- OTHER ASSETS PART II FORM 990PF,

ATTACHMENT 6

DESCRIPTION

ENTERPRISE PRODS PARTNERS LP

TOTALS

ATTACHMENT 6

PAGE 26

ATTACHMENT 7

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

ENTERPRISE PRODUCTS

-144.

TOTAL

-144.

ATTACHMENT 8

TORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION COMPENSATION	500.	.003	200.	.003	.000
VIII - LIST OF OFFICERS, DIRECTORS,	TITLE AND WEEK DEVOT	TRUSTEE	TRUSTEE	BANK & TRUST	TRUSTEE	TRUSTEE
FORM 990PF, PART VI	NAME AND ADDRESS	JULIE A. SCHWALBE DECATUR, IL	JON B. KRAFT DECATUR, IL	HICKORY POINT BANK DECATUR, IL	DAVID KOSHINSKI DECATUR, IL	BRIAN SCHWALBE DECATUR, IL

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION	ORD MISSION NONE OPERATING GRANT	Y RESCUE MISSION NONE OPERATING GRANT Y, MO	LUTHERAN HIGH SCHOOL NONE OPERATING GRANT MO	ENGE NONE OPERATING GRANT	COMMUNITY FUND, INC. NONE OPERATING GRANT	LUTHERAN MISSION OF THE GOOD SHEPHERD NONE NONE
	RECIPIENT NAME AND ADDRESS	JESUS IS LORD MISSION WALBURG, TX	KANSAS CITY RESCUE MISSION KANSAS CITY, MO	SAINT PAUL LUTHERAN HIGH SCHOOL CONCORDIA, MO	TEEN CHALLENGE DECATUR, IL	NORTHEAST COMMUNITY FUND, INC. DECATUR, IL	LUTHERAN MISSION OF THE

6,225.

AMOUNT

ATTACHMENT 9

6,225.

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ATTACHMENT 9 (CONT'D)

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CENTER FOR CHRISTIAN STATESMANSHIP WASHINGTON, D C	NONE	OPERATING GRANT	6, 225.
APPLE OF HIS EYE MISSION SOCIETY ST LOUIS, MO	NONE	OPERATING GRANT	6,225
GOD'S SHELTER OF LOVE DECATUR, IL	NONE	OPERATING GRANT	6,225
MOUNTAIN MOVERS CORINTH, TX	NONE	OPERATING GRAWT	3,075.
NEW HOUSE DECATUR, IL	NONE	OPERATING GRANT	6,225.
BOY SCOUTS OF DECATUR DECATUR, IL	NONE	OPERATING GRANT	6,225.

ATTACHMENT 9 (CONT'D)

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SALVATION ARMY DECATUR, IL	NONE	OPERATING GRANT	6, 225
MILLIKIN UNIVERSITY DECATUR, IL	NONE	OPERATING GRANT	20,000
GOOD SAWARITAN INN DECATUR, IL	NONE	OPERATING GRANT	6,225

104,000

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 9

83284 771000

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ATTACHMENT 10

PENALTY COMPUTATION DETAIL - FORM 2220			
DATE PD UNDERPAYMENT BEG.DATE END DATE	DAYS	olo	PENALTY
QUARTER 3, RATE PERIOD 1 (09/15/2009 -05/15/2010)			
59. 09/15/2009 05/15/2010 TOTAL TO FORM 2220, LINE 22, COLUMN C	242	4	<u>2.</u> 2.
QUARTER 4, RATE PERIOD 1 (12/15/2009 - 05/15/2010)			
403. 12/15/2009 05/15/2010 TOTAL TO FORM 2220, LINE 22, COLUMN D	 151	4	7.
TOTAL UNDERPAYMENT PENALTY			9.

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ATTACHMENT 1

PENALTY COMPUTATION DETAIL - FORM 2220			
DATE PD UNDERPAYMENT BEG.DATE END DATE QUARTER 3, RATE PERIOD 1 (09/15/2009 -05/15/2010)	DAYS	90	PENALTY
59. 09/15/2009 05/15/2010 TOTAL TO FORM 2220, LINE 22, COLUMN C	= 242	4	<u>2.</u> <u>2.</u>
QUARTER 4, RATE PERIOD 1 (12/15/2009 - 05/15/2010)			
403. 12/15/2009 05/15/2010 TOTAL TO FORM 2220, LINE 22, COLUMN D	151	4	7. 7.
TOTAL UNDERPAYMENT PENALTY			<u> </u>